FIRST SUN EAP
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Columbia, SC 29204
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www.firstsuneap.com

NETWORK SERVICE LOG

You may use this form for multiple clients

This form must be received on/before the 6th of each month after services are rendered to assure payment.

SERVICE CODES: **C** Clinical Session (we do not pay for no shows) **G** Group (must precertify sessions)

Authorization #	Primary Client Name or Title of Training	Employee's Company	Date	Service Code (see above	Time spent in session	Case Closing Data (report at last session or if client discontinues)		
						Disposition (codes below)	Still Employed?	If Referred, where to?

Disposition: Improved Unimproved Worse Continuing in new contract year

FIRST SUN EAP MUST RECEIVE THIS FORM BY THE 6TH OF **EACH** MONTH.
NETWORK SERVICE LOGS RECEIVED AFTER THE 6TH WILL BE PROCESSED DURING THE NEXT BILLING CYCLE

- Call First Sun immediately if you assess our client as a **danger to self/others, of questionable fitness for duty or if leave time from work is needed**. For employees regulated by: DOE, DOT, DOD, NRC- we must be notified of substance abuse problems. We will work with you to assure safety of both client and workplace.
- If you don't have an authorization number, please call us to obtain authorization for services. We can not pay for sessions until the month after services were provided.
- No fees may be charged to the client above the designated client copay. This includes fees that may be lost due to faulty billing. Fees may be charged for no shows if the client had informed consent.
- On your last authorized EAP session **OR** when client discontinues services, please complete the **Case Closing Data** for our statistical records
- Check out our website at www.firstsuneap.com to get helpful information, updates about events, download forms and sign up for electronic payment.

Provider's Printed Name	Provider and/ or Group Name, Mailing Address	Signature of Provider including credentials	
	☐ Check here if mailing address has changed		
Provider's Phone Number	**Provider's Fax Number**	**Provider/Group I.D. Number (SS# or F.E.I.D.#)**	**©First Sun EAP Alliance, Inc.**

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